



County of San Diego

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DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES

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Community Epidemiology
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Immunization
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing/Border Health
TB Control & Refugee Health
Vital Records

Base Station Physicians' Committee
Ian Reilly, M.D., Chairperson
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BASE STATION PHYSICIANS' COMMITTEE MEETING MINUTES TUESDAY, June 21, 2011

Members Present

Buono, M.D., Colleen – UCSD BHMD
Dunford, M.D., Jim – City of S.D. Medical Director
Kramer, M.D., Mark – Sharp Memorial BHMD
Linnik, M.D., Bill – Sharp Grossmont BHMD
Madati, M.D., Jamil – Children's Hospital ED MD
Meadows-Pitt, R.N., Mary – Sharp Grossmont BHNC
Reilly, M.D., Ian – Scripps La Jolla BHMD
Schwartz, M.D., Brad – AMR Medical Director
Tomaneng, M.D., Neil – Tri-City BHMD
Zahller, M.D., Steve – Scripps Mercy BHMD

Guests Present

Aker, Donna Kelly – UCSD ROC
Armstrong, Ted – UCSD
Bourdon, R.N., Darlene – Scripps Mercy
DeMers, Gerard – UCSD
Dotson, R.N., Melody – UCSD
Fix, Jim - PERT
Graydon, R.N., Cheryl – Palomar Medical Center
Green, M.D., Marie Denise – CDPH
Healy, R.N., Marla – Sharp Memorial
Howard, R.N., Luann – Scripps La Jolla

Associate Members

Anderson, R.N., Marilyn – Vista Fire
Broyles, R.N., Linda – RCCP/AMR
Davis, M.D., Dan - Mercy Air
Fisher, Roger – S.D. Fire
Forman, Kelly – Mercy Air
Hudnet, Carlen - SDMS
Klingensmith, Todd – S.D. Paramedic Assoc
Lindsey, Matt – North County Fire
Lemir, Harold – S.D. Fire Department
Maloney, M. Ryan - AMR
Ochs, R.N., Ginger – S.D. Fire Department
Rice, Mike - AMR
Roach, R.N., Lori – Escondido/San Marcos Fire
Russo, R.N., Joe – CSA-17
Seabloom, R.N., Lynn – Oceanside Fire
Vogt, Rick – San Marcos Fire

County Staff

Metz, R.N., Marcy - Chief EMS
Smith, R.N., Susan - EMS
Stepanski, Barbara - EMS

Idman-Gervais, R.N., Dianne – Sharp Grossmont
Johansen, Cody – InfoTech Systems Management
Kahn, Chris – UCSD
Killeen, Jim – S.D. Beacon
Ludington, Morgan – UCSD
Lumba, M.D., Angela – UCSD ED
Ninberg, Lori – RCHSD
Rosenberg, R.N., Linda – Sharp Memorial
Rosenberger, R.N., Wendy – Tri-City Medical Center
Sapida, Juliet – UCSD
Serra, M.D., John - UCSD
Smith, Dennis – Scripps Mercy
Takeucui, - UCSD
Wells, Chris – Scripps La Jolla
Young, Jami – S.D. Beacon

Recorder

Wolchko, Janet I.

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Ian Reilly, M. D., Chair called the meeting to order at 11:04 a.m.

II. APPROVAL OF MINUTES

A motion was made by Dr. Zahller to approve the minutes of May 17, 2011 as submitted.
Motion carried.

III. PERT (Jim Fix, M.D.)

Dr. Fix discussed the Psychiatric Emergency Response Team (PERT) and its interface with EMS. PERT has 24 fulltime mental health clinicians assigned to Law Enforcement throughout the County of San Diego from the Border to Oceanside, Ramona to Pine Valley and heavily concentrated downtown. Their coverage is 7 days a week from 6:00 a.m. to midnight or to 1:00 a.m. in Chula Vista. Most of PERT is made up of licensed county therapists, social workers and a few RNs.

Law Enforcement and the PERT team will call for patient transportation to a hospital if the patient is unstable or too confused to transfer in a patrol car. If the patient appears to be medically stable and has no medical problems it is standard to transport them in the patrol vehicle; nine out of 10 transports are transported via patrol car.

When patients are placed on a 5150 they should be taken to an LPS designated facility. The concern is that transporting a 5150 patient that may be disruptive to a non LPS facility could create a possible legal situation for that law enforcement agency. Discussion continued on liabilities associated with non-designated LPS facilities, and certified staff.

Dr. Fix stated that most of the patients placed on a 5150 are not under arrest. If they are under arrest, they will go to a psychiatric hospital for jail clearance. Typically those patients will not be transported in an ambulance, but if they are, the PERT team will follow the ambulance to the hospital and discuss the situation with the charge nurse or psych liaison.

If there are questions, contact Dr. Jim Fix at 619-276-8112. Dr. Fix will provide a list of LPS and non LPS designated facilities.

IV. BEACON PROJECT (J. Killeen, M.D.)

The American Recovery and Reinvestment Act (ARRA) has made grant funding opportunities available for healthcare administration and funding to build and strengthen the health IT infrastructure.

San Diego is one of 17 communities selected as a Beacon community to improve health information technology by adoption of health IT and community-wide Health Information Exchange (HIE). Clinical goals include reducing hospital readmissions, improve immunizations, improve cardio vascular disease outcome and reduce unnecessary radiology imaging and CT scans.

The San Diego Beacon Community Program is working with EMS to build and strengthen health IT infrastructure and exchange capabilities, and to demonstrate how the use of electronic health records and health IT can lead to improvements in healthcare quality. The San Diego Beacon HIE will link patients, healthcare providers, ambulances, clinics and hospitals electronically to improve communication and share medical information.

An explanation and demonstration of the EMS Hub was presented to show the identification process and how the information is entered and viewed.

BSPC discussed patient information exchange between hospitals and how information is made available in the reports.

V. BASE CONTACT/PATIENT ID (Mark Kramer, M.D.)

Dr. Kramer talked about base contact on acute patients and giving patient identifiers over the radio.

1. Acute patients were three percent of the patient transports last year. Information that the receiving base gets is often unclear, and at times when a patient arrives at the facility, their condition may appear different than what the physician expects.
2. Access to the patient's records electronically allows the physician to see the patient's past medical history.
3. Discussion ensued on how to transmit acute patient information over the radio safely. Information exchange via the radio can be authorized by the patient, but with the acute unconscious patient that authorization is unknown.

4. Comments and suggestions for discussion as a future agenda item were:
 - Identify acute patients by code or via the call information.
 - Get permission from the patient to release their information over the radio.
 - Obtain DNR information.

VI. MEDICAL DIRECTOR'S REPORT (Susan Smith, R.N.)

Marcy Metz, EMS Chief, presented a certificate of recognition from the County and Health and Human Services Agency to Dr. Zahller who has contributed to and served on many community committees.

Do not resuscitate (DNR) orders were reviewed in the Medical Director's Update. The revised POLST form took effect on April 1, 2011. When there is confusion or issues regarding DNRs, contact the base hospital and the physician.

2011 Policy and Procedure Treatment Guideline changes discussed were:

- Clarification concerns with the lidocaine dose and starting an IO line.
- Amiodarone administered as a piggyback in 100 mL of normal saline given over 10 minutes.
- External pacing on standing orders and the acceptable rates.
- Patient asthma conditions requiring base hospital physician order of epinephrine based on risk of adverse events.

Pertussis is still active, however cases are decreasing.

Measles: There are a number of measles cases. Ambulances that are used to transport measles patients should be decontaminated afterwards. Healthcare facility rooms are generally not used for two hours after a confirmed measles case.

VII. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)

The pediatric surge drill took place on June 16 and was a success.

The HPP10 grant year starts July 1, 2011.

The next statewide drill is in October.

VIII. ROC UPDATE (Dan Davis, M.D.)

The BLAST trial point-of-care devices that are being used to test lactate taken in the field and on arrival at the hospital have been distributed, and the training is completed.

The FDA has approved the Amiodarone, Lidocaine, and Placebo Study (ALPS). Implementation will begin locally with the same agencies that participated in the cardiac arrest studies previously.

Dr. Davis talked about styles of training comparing the ACLS/BLS model of training and the Performance Improvement (PI) and Continuous Quality Improvement (CQI) driven programs.

Policies and procedures on consistency with training will be discussed and addressed with Dr. Haynes, EMS Medical Director. The issue will be placed as a future item on the BSPC agenda.

IX. POLICY REVIEW

Policy A-457, Air Medical Support Utilization was presented to BSPC. The changes made to the policy were to the date and the County of San Diego Emergency Medical Services title. The policy will be forwarded to the Emergency Medical Care Committee.

X. ITEMS FOR FUTURE DISCUSSION

- Discussion on ART
- Contacts for acute patients
- Board certified EMS Dr. subspecialty
- Pediatric transfer guidelines

Dr. Dunford offered to give periodic updates on Healthcare reform from the National Quality Forum which is an organization that is advising Health and Human Services on all the new reforms of healthcare for 2012.

XI. SET NEXT MEETING/ADJOURNMENT

The next meeting will be July 19, 2011, 11:00 a.m. at Sharp Spectrum, 8695 spectrum Center Court, Kearny Mesa, San Diego, CA.

The meeting was adjourned at 12:50 p.m.